

Substitute for form 1449/PTO INFORMATION DISCLOSURE STATEMENT BY APPLICANT <i>(Use as many sheets as necessary)</i>				Complete if Known	
				Application Number	09/636,039
				Filing Date	August 9, 2000
				First Named Inventor	Graham, Jamey
				Art Unit	2178
				Examiner Name	Joshua D. Campbell
Sheet	1	of	2	Attorney Docket Number	015358-004240US

U.S. PATENT DOCUMENTS					
Examiner Initials*	Cite No. ¹	Document Number	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear
		Number Kind Code ² (if known)			
	AA	US- 5,535,382 A	07-09-1996	Ogawa	
	AB	US- 6,397,213 B1	05-28-2002	Cullen et al.	
	AC	US- 7,096,424 B2	08-22-2006	Graham et al.	

FOREIGN PATENT DOCUMENTS						
Examiner Initials*	Cite No. ¹	Foreign Patent Document	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear	T ¹
		Country Code ³ Number ⁴ Kind Code ⁵ (if known)				
						<input type="checkbox"/>

NON PATENT LITERATURE DOCUMENTS			
Examiner Initials *	Cite No. ¹	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published.	T ²
	48-2_A	Non-Final Office Action for U.S. Patent Application No. 11/482,529, mailed on July 21, 2009, 24 pages. (Copy available to the Examiner via PAIR and accordingly not included with this IDS)	<input type="checkbox"/>
	55-1_A	Non-Final Office Action for U.S. Patent Application No. 11/613,846, mailed on October 14, 2009, 20 pages. (Copy available to the Examiner via PAIR and accordingly not included with this IDS)	<input type="checkbox"/>

Examiner Signature	/Joshua Campbell/	Date Considered	02/02/2010
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*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.
¹ Applicant's unique citation designation number (optional). ² Applicant is to place a check mark here if English language Translation is attached.